

89476971

1a) 13 Cyanide Soln

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89476971  
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GENERATOR

TRANSPORTER

FACILITY

| UNIFORM HAZARDOUS WASTE MANIFEST   |  | 1. Generator's US EPA ID No.<br>C.A.D.0.8.6.5.1.0.0.5.9.1.1.3.1 |  | Manifest Document No. 1 |  | 2. Page 1 of 1  |  | Information in the shaded areas is not required by Federal law. |  |                                 |  |                   |  |                                   |  |  |  |
|--|--|---|--|-------------------------|--|---|--|---|--|---------------------------------|--|-------------------|--|-----------------------------------|--|--|--|
| 3. Generator's Name and Mailing Address<br>Aircraft Co.<br>19503 S. Normandie Avenue<br>Torrance, CA 90502   |  |   |  |                         |  | A. State Manifest Document Number<br>89476971                             |  |   |  |                                 |  |                   |  |                                   |  |  |  |
| 4. Generator's Phone (213) 533-6677 K. L. Anderson 722 M/S C6-10   |  |   |  |                         |  | B. State Generator's ID<br>H.A.H.Q.3.6.0.0.5.6.9.8                        |  |   |  |                                 |  |                   |  |                                   |  |  |  |
| 5. Transporter 1 Company Name<br>Ward-Barker, Inc.   |  |   |  |                         |  | C. State Transporter's ID<br>101498                                       |  |   |  |                                 |  |                   |  |                                   |  |  |  |
| 6. US EPA ID Number<br>C.A.D.9.8.1.5.7.1.1.7.7   |  |   |  |                         |  | D. Transporter's Phone (213)432-7266                                      |  |   |  |                                 |  |                   |  |                                   |  |  |  |
| 7. Transporter 2 Company Name  |  |   |  |                         |  | E. State Transporter's ID   |  |   |  |                                 |  |                   |  |                                   |  |  |  |
| 8. US EPA ID Number  |  |   |  |                         |  | F. Transporter's Phone  |  |   |  |                                 |  |                   |  |                                   |  |  |  |
| 9. Designated Facility Name and Site Address<br>ETICAM   |  |   |  |                         |  | G. State Facility's ID<br>N.V.D.9.8.0.8.9.5.3.3.8                         |  |   |  |                                 |  |                   |  |                                   |  |  |  |
| 10. US EPA ID Number<br>N.V.D.9.8.0.8.9.5.3.3.8  |  |   |  |                         |  | H. Facility's Phone<br>(702)575-2760                                      |  |   |  |                                 |  |                   |  |                                   |  |  |  |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)   |  |   |  |                         |  | 12. Containers<br>No. Type  |  | 13. Total Quantity  |  | 14. Unit<br>Wt./Vol             |  | 1. Waste No.      |  |                                   |  |  |  |
| a. WASTE CYANIDE SOLUTION, n.o.s., POISON B, UN1935, RQ 10(4.54)   |  |   |  |                         |  | 0 10 12 T I P   |  | 0 0 6 1 5 0   |  | G                               |  | State<br>711      |  |                                   |  |  |  |
| b.   |  |   |  |                         |  |   |  |   |  |                                 |  | EPA/Other<br>P030 |  |                                   |  |  |  |
| c.   |  |   |  |                         |  |   |  |   |  |                                 |  | State             |  |                                   |  |  |  |
| d.   |  |   |  |                         |  |   |  |   |  |                                 |  | EPA/Other         |  |                                   |  |  |  |
| J. Additional Descriptions for Materials Listed Above<br>Cyanide 0-5% Copper 0-2%<br>Solids 0-10%  |  |   |  |                         |  | K. Handling Codes for Wastes Listed Above<br>a. 01 15 b.<br>99/Filtration |  |   |  |                                 |  |                   |  |                                   |  |  |  |
| E.H. Permit #4-89030101 Expir Date: 03/01/90   |  |   |  |                         |  | c. d.   |  |   |  |                                 |  |                   |  |                                   |  |  |  |
| 15. Special Handling Instructions and Additional Information<br>Wear gloves, goggles, and respirator when handling.<br>PROFILE #CYANIDE<br>HAULER 21233<br>49 SITE   |  |   |  |                         |  |   |  |   |  |                                 |  |                   |  |                                   |  |  |  |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.<br>If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. |  |   |  |                         |  |   |  |   |  |                                 |  |                   |  |                                   |  |  |  |
| Printed/Typed Name<br>Kris L. Anderson Agent for M.D.A.C.  |  |   |  |                         |  | Signature<br><i>[Signature]</i>   |  |   |  | Month Day Year<br>0 3 2 2 9 0   |  |                   |  |                                   |  |  |  |
| 17. Transporter 1 Acknowledgement of Receipt of Materials  |  |   |  |                         |  | Printed/Typed Name<br><i>[Signature]</i>                                  |  |   |  | Signature<br><i>[Signature]</i> |  |                   |  | Month Day Year<br>10 3 12 12 1 70 |  |  |  |
| 18. Transporter 2 Acknowledgement of Receipt of Materials  |  |   |  |                         |  | Printed/Typed Name  |  |   |  | Signature                       |  |                   |  | Month Day Year                    |  |  |  |
| 19. Discrepancy Indication Space   |  |   |  |                         |  |   |  |   |  |                                 |  |                   |  |                                   |  |  |  |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.  |  |   |  |                         |  |   |  |   |  |                                 |  |                   |  |                                   |  |  |  |
| Printed/Typed Name<br>THOMAS A. MEDEIROS   |  |   |  |                         |  | Signature<br><i>[Signature]</i>   |  |   |  | Month Day Year<br>0 3 2 3 9 0   |  |                   |  |                                   |  |  |  |



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|---|--|---|--|-----------------------------------|--|--|--|---|--|-----------------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator's US EPA ID No.<br>C.A.D.0.8.6.5.1.0.0.0.5 |  | Manifest Document No.<br>91111111 |  | 2. Page 1 of 1                                       |  | Information in the shaded areas is not required by Federal law. |  |                 |  |
| 3. Generator's Name and Mailing Address<br>H. Anderson Aircraft Co.<br>19503 S. Normandie Avenue<br>Torrance, CA 90502  |  |   |  |                                   |  | A. State Manifest Document Number<br><b>89476971</b> |  |   |  |                 |  |
|   |  |   |  |                                   |  | B. State Generator's ID<br>H.A.H.Q.3.6.0.0.5.6.9.8   |  |   |  |                 |  |
| 4. Generator's Phone (213) 533-6677 K. L. Anderson 722 M/S CG-10  |  |   |  |                                   |  | C. State Transporter's ID<br>101490                  |  |   |  |                 |  |
| 5. Transporter 1 Company Name<br>Ward-Barker, Inc.  |  |   |  |                                   |  | D. Transporter's Phone (213) 432-7266                |  |   |  |                 |  |
| 6. US EPA ID Number<br>C.A.D.9.8.1.5.7.1.1.7.7  |  |   |  |                                   |  | E. State Transporter's ID                            |  |   |  |                 |  |
| 7. Transporter 2 Company Name   |  |   |  |                                   |  | F. Transporter's Phone                               |  |   |  |                 |  |
| 8. US EPA ID Number   |  |   |  |                                   |  | G. State Facility's ID                               |  |   |  |                 |  |
| 9. Designated Facility Name and Site Address<br>ETICAM<br>2095 Newlands Dr. East<br>Fernley, Nv. 89408  |  |   |  |                                   |  | H. Facility's Phone<br>(702) 575-2760                |  |   |  |                 |  |
| 10. US EPA ID Number<br>N.V.D.9.8.0.8.9.5.3.3.8   |  |   |  |                                   |  |  |  |   |  |                 |  |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)  |  |   |  |                                   |  | 12. Containers No.                                   |  | 13. Total Quantity  |  | 14. Unit Wt/Vol |  |
| a. WASTE CYANIDE SOLUTION, n.o.s., POISON B, UN1935, RQ 10(4.54)  |  |   |  |                                   |  | 01012  |  | TIP   |  | 00650 G         |  |
|   |  |   |  |                                   |  |  |  |   |  |                 |  |
|   |  |   |  |                                   |  |  |  |   |  |                 |  |
|   |  |   |  |                                   |  |  |  |   |  |                 |  |
|   |  |   |  |                                   |  |  |  |   |  |                 |  |
| J. Additional Descriptions for Materials Listed Above   |  |   |  |                                   |  | K. Handling Codes for Wastes Listed Above            |  |   |  |                 |  |
| Cyanide 0-5% Copper 0-2%<br>Solids 0-10%<br><br>E.H. Permit #4-89030101 Expir Date: 09/01/90  |  |   |  |                                   |  | a.   |  |   |  |                 |  |
|   |  |   |  |                                   |  | b.   |  |   |  |                 |  |
|   |  |   |  |                                   |  | c.   |  |   |  |                 |  |
| 15. Special Handling Instructions and Additional Information  |  |   |  |                                   |  | 16.  |  |   |  |                 |  |
| Wear gloves, goggles, and respirator when handling.   |  |   |  |                                   |  | PROFILE #CYANIDE                                     |  |   |  |                 |  |
|   |  |   |  |                                   |  | HAULER 21233<br>SITE                                 |  |   |  |                 |  |
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| Printed/Typed Name  |  |   |  |                                   |  | Signature  |  | Month Day Year  |  |                 |  |
| Kris L. Anderson Agent for M.D.A.C.   |  |   |  |                                   |  |  |  | 032290  |  |                 |  |
| 17. Transporter 1 Acknowledgement of Receipt of Materials   |  |   |  |                                   |  | Signature  |  | Month Day Year  |  |                 |  |
| Printed/Typed Name  |  |   |  |                                   |  |  |  | 10312270  |  |                 |  |
| 18. Transporter 2 Acknowledgement of Receipt of Materials   |  |   |  |                                   |  | Signature  |  | Month Day Year  |  |                 |  |
| Printed/Typed Name  |  |   |  |                                   |  |  |  |   |  |                 |  |
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|   |  |   |  |                                   |  |  |  |   |  |                 |  |

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